

ACCOUNT NO. :

072100000032

REFERENCE :

359423 5020685

AUTHORIZATION :

Patricia Pageta

COST LIMIT : \$ 35.00

ORDER DATE: May 8, 1997

ORDER TIME :

9:53 AM

ORDER NO. : 359423

CUSTOMER NO: 5020685

200002172963--4

CUSTOMER: Ms. Marjorie Porter Sun Healthcare Group 101 Sun Lane, N.e.

Albuquerque, NM 87109

NAME:

SUNFACTORS, INC.

CHANGE OF AGENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Warren Whittaker



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 9, 1997

CSC WARREN TALLAHASSEE, FL

SUBJECT: SUNFACTORS, INC. Ref. Number: P93000062014

RESUBMIT

Please give original submission date as file date.

We have received your document for SUNFACTORS, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6957.

Joy Moon-French Corporate Specialist

Letter Number: 997A00024915

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

the undersign	the provisions of sections 607.0502, 617.0502, 607.1508 ned corporation organized under the laws of the State following statement in order to change its registered office Florida.	e of Florida
1a. The nam	ne of the corporation is:SunFactors, Inc.	
1b. The mai	ling address of the corporation is: 101 Sun Lane, NE	E, Albuquerque, New Mexico
1c. Date of i	incorporation: September 3, 1993 Document number	:P93000062014
2. The name	and address of the current registered agent and office: Mark R. Miklos	
	6925 112th Circle, North Suite 102	
	Largo, Florida 34643	2 07
3. The name	e and address of the new registered agent and office:(P.C	SECKLING SECKLE OF DIALE SECKLING SECKL
	1201 Hays Street	_
registered ag Such change	Tallahassee, Florida 32301 Idress of its registered office and the street address of ent, as changed, will be identical. was authorized by resolution duly adopted by its board	
So authorized	d by the board.	5,1997
	e of an officer, chairman or chairman of the board)	(Date)
Nikki J. (Printed o Having been a corporation, /	Mann, Secretary or typed name and title) named as registered agent and to accept service of pro- hereby accept the appointment as registered agent and rther agree to comply with the provisions of all statutes	d agree to act in this
posítion as re	formance of my duties, and I am familiar with and acce gistered agent.	pt the obligation of my
By: Llelia	of Registered Agent)	5/22/96
	e of Registered Agent) Dehalf on an entity:	(Date)
Deborah	D. SKipper as	agent
	Printed Name)	(Capacity)

FILING FEE: \$35.00

CR2E045(11/94)